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PTO/SB/01 (03-01)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing
OR
☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number WELLSP 3.0-002 CIP

First Named Inventor Robert Vukovich

COMPLETE IF KNOWN

Application Number 10/812,156

Filing Date March 29, 2004

Group Art Unit N/A

Examiner Name Not Yet Assigned

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

PREPARATION OF METAL MESOPORPHYRIN HALIDE COMPOUNDS

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 03/29/2004 as United States Application Number or PCT International

Application No. 10/812,156 and was amended on (MM/DD/YYYY) (if applicable).

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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

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Direct all correspondence to:



Customer Number
or Bar Code Label

000530

OR ☐

Correspondence address below

Name

Address

City

State

ZIP

Country

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:



A petition has been filed for this unsigned inventor

Given Name
(first and middle (if any))

Robert

Family Name
or Surname

Vukovich

Inventor's
Signature

Date

Residence: City

Holmdel

NJ
State

United States of
America

Citizenship

US

Mailing
Address:

7 Taylor Run

City

Holmdel

NJ
State

ZIP

07733

Country

United States of America

NAME OF SECOND INVENTOR:



A petition has been filed for this unsigned inventor

Given Name
(first and middle (if any))

Benjamin

Family Name
or Surname

Levinson

Inventor's
Signature

Date

Residence: City

Montgomery

NJ
State

United States of
America

Citizenship

US

Mailing
Address:

91 Dead Tree Run Road

City

Montgomery

NJ
State

ZIP

08502

Country

United States of America

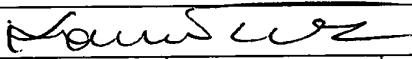


Additional inventors are being named on the

2

supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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DECLARATION				ADDITIONAL INVENTOR(S) Supplemental Sheet	
				Page <u>1</u> of <u>2</u>	
Name of Additional Joint Inventor, if any:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any))			Family Name or Surname		
George S.			Drummond		
Inventor's Signature			Date		
Residence: City		State		Citizenship	
New York		NY		United States of America	
United Kingdom					
Mailing Address: 304 West 75th Street					
City		State		Zip	
New York		NY		10023	
United States of America					
Name of Additional Joint Inventor, if any:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any))			Family Name or Surname		
Robert			Caroselli, R.ph		
Inventor's Signature			Date		
Residence: City		State		Citizenship	
East Brunswick		NJ		United States of America	
US					
Mailing Address: 5 Independence Drive					
City		State		Zip	
East Brunswick		NJ		08816	
United States of America					
Name of Additional Joint Inventor, if any:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any))			Family Name or Surname		
Kazimierz G.			Antczak		
Inventor's Signature 			Date <u>April 24, 04</u>		
Residence: City		State		Citizenship	
Culver		IN		United States of America	
Canada					
Mailing Address: 7824 Blue Heron Ct.					
City		State		Zip	
Culver		IN		46511	
United States of America					
Name of Additional Joint Inventor, if any:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any))			Family Name or Surname		
Christopher			Boucher		
Inventor's Signature			Date		
Residence: City		State		Citizenship	
Newmarket		Canada		Canada	
Canada					
Mailing Address: 37 Harrsion Drive					
City		State		Zip	
Newmarket		ON		L3Y4P3	
Canada					

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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Richard		Mortimer	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Toronto	Ontario	Canada	Canada
Mailing Address: 98 Glenvale Boulevard			
City	State	Zip	Country
Toronto	ON	M4G2V9	Canada
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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Danny		Levin	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Toronto	Canada	Canada	Canada
Mailing Address: 27 McGlashan Court			
City	State	Zip	Country
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Given Name (first and middle (if any))		Family Name or Surname	
Keith A.		Cooke	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Milton	Canada	Canada	Canada
Mailing Address: 470 Gowland Cres.			
City	State	Zip	Country
Milton	ON	L9T 4E5	Canada
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Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address:			
City	State	Zip	Country

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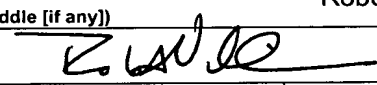
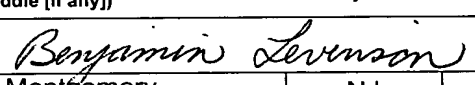
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Direct all correspondence to: <input checked="checked" type="checkbox"/> Customer Number or Bar Code Label		000530		OR <input type="checkbox"/> Correspondence address below	
Name					
Address					
City			State		ZIP
Country		Telephone		Fax	
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>					
NAME OF SOLE OR FIRST INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Robert			Family Name or Surname Vukovich		
Inventor's Signature 			Date 4/23/04		
Residence: City Holmdel		State NJ	United States of America		Citizenship US
Mailing Address:	7 Taylor Run				
City Holmdel		State NJ	ZIP 07733	United States of America	
NAME OF SECOND INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Benjamin			Family Name or Surname Levinson		
Inventor's Signature 			Date 4/23/04		
Residence: City Montgomery		State NJ	United States of America		Citizenship US
Mailing Address:	91 Dead Tree Run Road				
City Montgomery		State NJ	ZIP 08502	United States of America	
<input checked="checked" type="checkbox"/> Additional inventors are being named on the <u>2</u> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					

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Given Name (first and middle (if any)) George S.		Family Name or Surname Drummond	
Inventor's Signature <i>George S. Drummond</i>		Date April 23rd, 2004	
Residence: City New York	State NY	United States of America	Citizenship United Kingdom
Mailing Address: 304 West 75th Street			
City New York	State NY	Zip 10023	Country United States of America
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) Robert		Family Name or Surname Caroselli, R.ph	
Inventor's Signature <i>Robert Caroselli</i>		Date April 23, 2004	
Residence: City East Brunswick	State NJ	United States of America	Citizenship US
Mailing Address: 5 Independence Drive			
City East Brunswick	State NJ	Zip 08816	Country United States of America
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) Kazimierz G.		Family Name or Surname Antczak	
Inventor's Signature <i>Kazimierz G. Antczak</i>		Date	
Residence: City Culver	State IN	United States of America	Citizenship Canada
Mailing Address: 7824 Blue Heron Ct.			
City Culver	State IN	Zip 46511	Country United States of America
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) Christopher		Family Name or Surname Boucher	
Inventor's Signature <i>Christopher Boucher</i>		Date	
Residence: City Newmarket	State Canada	Country Canada	Citizenship Canada
Mailing Address: 37 Harrsion Drive			
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Given Name (first and middle (if any))			Robert		
Family Name or Surname			Vukovich		
Inventor's Signature				Date	
Residence: City		State		Citizenship	
Holmdel		NJ		United States of America	
Mailing Address:		7 Taylor Run			
City		State		Country	
Holmdel		NJ		United States of America	
ZIP		07733			
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Family Name or Surname			Levinson		
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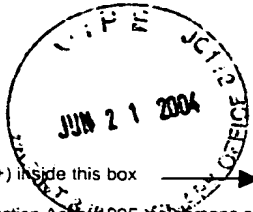
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Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address:			
City	State	Zip	Country



Please type a plus sign (+) inside this box

+

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing OR ☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number WELLSP 3.0-002 CIP

First Named Inventor Robert Vukovich

COMPLETE IF KNOWN

Application Number 10/812,156

Filing Date March 29, 2004

Group Art Unit N/A

Examiner Name Not Yet Assigned

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

PREPARATION OF METAL MESOPORPHYRIN HALIDE COMPOUNDS

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 03/29/2004 as United States Application Number or PCT International

Application No. 10/812,156 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

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DECLARATION — Utility or Design Patent Application

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Customer Number 000530

Direct all correspondence to:		<input checked="" type="checkbox"/> Customer Number or Bar Code Label	000530		OR <input type="checkbox"/> Correspondence address below
Name					
Address					
City		State		ZIP	
Country		Telephone		Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))			Family Name or Surname		
Robert			Vukovich		
Inventor's Signature			Date		
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City		State		Country	
Holmdel		NJ		United States of America	
ZIP		07733			
NAME OF SECOND INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))			Family Name or Surname		
Benjamin			Levinson		
Inventor's Signature			Date		
Residence: City		State		Citizenship	
Montgomery		NJ		US	
Mailing Address:		91 Dead Tree Run Road			
City		State		Country	
Montgomery		NJ		United States of America	
ZIP		08502			
<input checked="" type="checkbox"/> Additional inventors are being named on the <u>2</u> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet
Page <u>1</u> of <u>2</u>	

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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Robert		Caroselli, R.ph	
Inventor's Signature		Date	
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
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Culver	IN	46511	United States of America
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address:			